APPEAR OF THE SECTION OF SHAPE OF SECTIONS

C-2 Rev. 04/04



## CAMPAIGN FINANCIAL DISCLOSURE REPORT SUMMARY PAGE

(Please Print or Type)

***************************************			52 7 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Name of Candidate or Political Committee and Chairperson	•		Diaria (if ens): 19
Samuel C. MEEVEY		Senate	
Mailing Address		Home Phone	Think Phone
1439 Elm Place	Meridian 830	42 888-973	11 878-1234
arms of Political Treasurer		,	PIMIT OF IDAMO
Samuel C. MCEVpy  Valing Address   Crock if Address co			
	City and Zip	Home Plune	Work Phone
1439 Elm Place	Mersidian 83	642 888-97	2/ 888-1234
ection li			
	TYPE OF REPORT		
Directions: To indicate the type of report being		ites and check the approp	prieto box(cs). See the
instructional manual for reporting periods and	lue dates.	SCA1	
This report is for the period f	rom 10 / 18 / 04	_through _ <i>FRIG</i> /	2 04
	, m		
7 Day Pre-Primary Report	30 Day Post-Primary Rep		er 10 Pre-General Report
7 Day Pre-General Report	30 Day Post-General Rep	ort Annu	al Dancet
[] / Day 110-delical Report	(2) 30 Day 1031-October Net	Aur C Sangar	а, керил
Semi-Annual Report (Statewide Candi	dates Only)		
<u> </u>			
Is this Report an amendment?	Yes I No is this	a Termination Report?	☐ Yes EZ No
Section III STATEMENT	OF NO CONTRIBUTIONS	OR EXPENDETURES	•
Directions: If you had no contributions or expe			
the appropriate dates and sign this report. Be so	are to carry forward the approp	riate "Calendar Year to I	Dule" figures in Column II.
Section IV.			
☐ I hereby certify that I have received:	no contributions and have mad	e no expenditures during	this reporting period
TOSD/	through		
Section IV	SUMMARY		
To reach your Calendar Year to Date figure: Ac		COLUMN 1	COLUMN B
figures to the Column II figures of your previous	ne nemore (except on line 6)	This Period	Calendar Year to Date
	sofote (except on time o).	I HIS I CLIME	Catendar teat in Date
Line 1: Cash on Hand January 1. This Year*		s XXXXXX	s <u>34.53</u>
Line 2: Emer Cash Balance at Close of Last Re	porting Period**	\$ 1/9.53	s XXXXXX
Line 3: Total Contributions (Enter amount from		\$ 500.00	\$ 450,00
Line 4: Subtotal (Add lines 1, 2 and 3)			5 984.53
	23	\$ 4/9.53	
Line 5: Total Expenditures (Enter amount from		5 174,53	5 _ 53153
Line 6: Cash Balance at Close of Period (Subtra	ct line 5 from line 4)**	s 445.00	5 HU5.00

Section V

Reture This Report To:
Ben Ysursa
Secretary of State
PO Box 83720
Boise ID 83729-0080
ріюле: (208) 334-2852
fax: (208) 334-2282

Line 7: Outstanding Debt to Date

I Samuel C. McEyou , hereby certify that the information in this report is a true, complete and correct Campaign Financial Disclosure Report as
required by law.
Standaure of Political Treasury

CERTIFICATION

<sup>\*</sup>This same figure should be entered on line 1 of all reports filed this calendar year.

\*\*You must report the cash on hand at both the beginning of the reporting period and the close of the reporting period. Note that the closing cash balance for the current reporting period appears on the next report as beginning cash on hand.

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## **DETAILED SUMMARY PAGE**

Name of Canadate of Committee	Keport Covering the Ferrod
Samuel C. McEvoy	From 10/18/04 to 11/12/04
UNITEMIZED CO	ONTRIBUTIONS
Contributions of Fifty Dollars	
Total	Total
Number	Amount \$
UNITEMIZED	EXPENDITURES
Expenditures of Less Than Twenty	
Total	Total
Number 3	Amount 8 57.14

	Total This Period
Number of Schedule A pages Attached	
Contributions	
Unitemized Contributions (\$50 and less) from top of page	S pr
Itemized Contributions (total all Schedule A sheets)	\$ 500.00
Total Contributions (also enter this figure on page 1, Section IV, line 3)	\$ 500.00
Number of Schedule B pages Attached	
Expenditures	
Unitemized Expenditures (less than \$25) from top of page	\$ 57.14
Itemized Expenditures (total all Schedule B sheets)	\$ 1/7,39
Total Expenditures (also enter this figure on page 1, Section IV, line 5)	\$ 174.53

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## SCHEDULE A ITEMIZED CONTRIBUTIONS of more than Fifty Dollars (\$50.00) this period

Dage	οF
× -6-	, ••
	•

Name of	Candidate or Comm	nilles		
į	Samuel	C. MCEVEY		

		Column A	Column B	Colonna C
Date/ Receipt For	Fidi Nume, Malling Address and Zip Code of Contributor/Lender	Cash or Check	In-Kind (non-monetary)	T,nans
10/12/04	1. Idaho Pemocratic Party Coordinated Campaign CentralComm.	s 500.00	s	s
Primary General	P.O. Boy 445 Boise, Id. 83701	\$ 500.00 Calendar Year To Data	SCalender Year To Date	Callender Year to Date
	2.	s	s	s
☐ Primary ☐ General		S Calendar Year To Date	S Columbus Your To Date	Calendar Year to Date
	5.	s	s	s
☐ Primery ☐ General		\$Colonder Year To Date	Calendar Year To Date	SCalendar, Year to Dote
	•	\$	s	s
☐ Primery ☐ General		SCxionalus Year To Date	S Calendar Your To Duso	SColumbar Year to Date
	5.	s	s	s
C Primary C General		\$	S Calendar Year To Debt	SCulouder Year to Deta
	<b>d</b>	s	s	s
☐ Primary ☐ General		SCalendar Year To Date	SCalander Year To Date	SCalcolar Year to Date
	7.	s	s	s
☐ Primary ☐ General	,	\$Caleadar Year To Date	SCulenatur Year To Date	\$Callender Year to Date
	8.	s	s	s
☐ Primery ☐ General		S Calendar Year To Date	SColondor Year To Dear	SCalunder Year to Date
	9.	s	s	s
☐ Primery ☐ General		\$Calendar Your To Duty	\$Calendar Year To Date	S Call and ar Your to Date
	10.	s	s	s
☐ Primary ☐ General		S Columber Year To Date	\$Calender Your To Date	SCulmader Year to Date
	Subtotals of Columns A, B & C	s <u>500.00</u>	s	s
	Total This Page (add columns A, B & C)	1		s <u>500.00</u>

Name of Candidate or Committee

## SCHEDULE B ITEMIZED EXPENDITURES

Page	of
6	/

of Twenty-Five Dollars (\$25.00) or more this period

Samuel C. MELVOY				
		Column A	Совинии В	
Date	Full Name, Mailing Address and Zip Code of Recipient	Cash of Check	in-Kind (non-monetary)	
	1. Office Paper E. Fairview			
10/30/04		s 76.15	s	
Purpose of Ab	ove Expenditure: Fliers			
	Albertson 20 E. Fairriew			
10/31 104	Meridian, Idaho 83642	s_41.44	\$	
Perpose of Abe	ove Expenditure: Food for volunteers			
	3.			
, ,		\$	\$ <u></u>	
Purpose of Abo	ove Expenditure:			
	•			
<i>f</i> ,		s	s	
Prenous of Ale	ove Expanditure:			
A CAL PLANE OF ALL	5.			
		s	s	
	<u> </u>	*	<b>3</b>	
Purpose of Abo	ove Expenditure.			
}	6.		-  -	
		s	s	
Purpose of Abo	ove Expanditure:		-	
	7.			
		s	\$	
Purpose of Abo	ove Expenditure:		<u> </u>	
	8.		[	
, ,	·	s	s	
Purpose of Abe	ove Expenditure:		<u> </u>	
	9.		l	
<i>f</i> /		s		
Purpose of Ab	ove Expenditure:			
	Subtotals of Columns A & B	\$ 117,39	s	
	Total This Page (add columns A & B)		s_1/7,39	